

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 14

Application Number	09/890,432
Filing Date	07/06/2001
First Named Inventor	KLEIMAN
Art Unit	1617
Examiner Name	KANTAMENI, SHOBHA
Attorney Docket Number	FLORA.1100

ENCLOSURES (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form

<input type="checkbox"/> Fee Attached

<input type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)

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<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Reply to Missing Parts/Incomplete Application
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<input type="checkbox"/> Licensing-related Papers

<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
<input type="checkbox"/> Change of Correspondence Address

<input type="checkbox"/> Terminal Disclaimer

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<input type="checkbox"/> CD, Number of CD(s) _____
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<div style="border: 1px solid black; padding: 2px;">Remarks</div> | <input type="checkbox"/> After Allowance Communication to TC

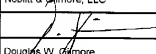
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences

<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

<input type="checkbox"/> Proprietary Information

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<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
PROPOSED AMENDMENT FOR DISCUSSION PURPOSES FOR IN-PERSON EXAMINER INTERVIEW |
|---|---|--|

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Noblitt & Gilmore, LLC		
Signature			
Printed name	Douglas W. Gilmore		
Date	10/19/2007	Reg. No.	46690

CERTIFICATE OF TRANSMISSION/MAILING

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